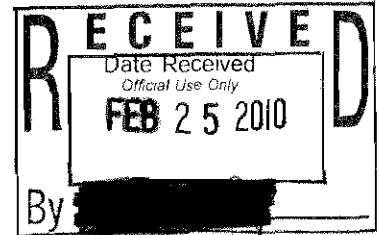


STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

10 FEB 25 PM 3:36

A Public Document

EB



Please type or print in ink.

| | | | |
|-----------------------------------------------|------------|------------|--------------------------|
| NAME (LAST) | (FIRST) | (MIDDLE) | DAYTIME TELEPHONE NUMBER |
| Fuller | Jean(nie) | Lynn | [redacted] |
| MAILING ADDRESS (Business Address Acceptable) | STREET | CITY | STATE ZIP CODE |
| [redacted] | [redacted] | [redacted] | [redacted] |
| OPTIONAL E-MAIL ADDRESS | | | |

1. Office, Agency, or Court

Name of Office, Agency, or Court:

CA State Assembly

Division, Board, District, if applicable:

District 32

Your Position:

Member of the Assembly

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ County of _____

☐ City of _____

☐ Multi-County _____

☐ Other _____

3. Type of Statement (Check at least one box)

☐ Assuming Office/Initial

Date: ____/____/____

☒ Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

☐ The period covered is ____/____/____, through December 31, 2009.

☐ Leaving Office Date Left: ____/____/____ (Check one)

☐ The period covered is January 1, 2009, through the date of leaving office.

-or-

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate Election Year: _____

4. Schedule Summary

► Total number of pages including this cover page: 9

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☐ Yes -- schedule attached
Investments (Less Than 10% Ownership)

Schedule A-2 ☒ Yes -- schedule attached
Investments (10% or Greater Ownership)

Schedule B ☒ Yes -- schedule attached
Real Property

Schedule C ☐ Yes -- schedule attached
Income, Loans, & Business Positions (Income Other Than Gifts and Travel Payments)

Schedule D ☒ Yes -- schedule attached
Income -- Gifts

Schedule E ☒ Yes -- schedule attached
Income -- Gifts -- Travel Payments

-or-

☐ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed

Feb, 24, 2010
(month, day, year)

Signature

[redacted signature]

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

| |
|-------------------------------------------------------------------|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name Jean(nie) Fuller |

▶ 1. BUSINESS ENTITY OR TRUST

Woodbridge Apartments

Name
43920 & 43950 Bobby Jones Dr Lancaster CA

Address (Business Address Acceptable)

Check one
☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Rental Apartments

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

| | | |
|------------------------------------------------------|--------------|--------------|
| <input type="checkbox"/> \$2,000 - \$10,000 | ____/____/09 | ____/____/09 |
| <input type="checkbox"/> \$10,001 - \$100,000 | ACQUIRED | DISPOSED |
| <input type="checkbox"/> \$100,001 - \$1,000,000 | | |
| <input checked="" type="checkbox"/> Over \$1,000,000 | | |

NATURE OF INVESTMENT
☐ Sole Proprietorship ☒ Partnership ☐ Other

YOUR BUSINESS POSITION Partner

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

| | |
|---------------------------------------------|----------------------------------------------------|
| <input type="checkbox"/> \$0 - \$499 | <input type="checkbox"/> \$10,001 - \$100,000 |
| <input type="checkbox"/> \$500 - \$1,000 | <input checked="" type="checkbox"/> OVER \$100,000 |
| <input type="checkbox"/> \$1,001 - \$10,000 | |

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)

No one partner receives more than \$10,000 of income from a single tenant

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
☐ INVESTMENT ☒ REAL PROPERTY

Woodbridge Apartments

Name of Business Entity or
Street Address or Assessor's Parcel Number of Real Property

43920 & 43950 Bobby Jones Dr Lancaster CA 93536

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

| | | |
|------------------------------------------------------|--------------|--------------|
| <input type="checkbox"/> \$2,000 - \$10,000 | ____/____/09 | ____/____/09 |
| <input type="checkbox"/> \$10,001 - \$100,000 | ACQUIRED | DISPOSED |
| <input type="checkbox"/> \$100,001 - \$1,000,000 | | |
| <input checked="" type="checkbox"/> Over \$1,000,000 | | |

NATURE OF INTEREST
☐ Property Ownership/Deed of Trust ☐ Stock ☒ Partnership

☐ Leasehold _____ Yrs. remaining ☐ Other _____

☐ Check box if additional schedules reporting investments or real property are attached

Comments: Rental Apartments

▶ 1. BUSINESS ENTITY OR TRUST

Name

Address (Business Address Acceptable)

Check one
☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

| | | |
|--------------------------------------------------|--------------|--------------|
| <input type="checkbox"/> \$2,000 - \$10,000 | ____/____/09 | ____/____/09 |
| <input type="checkbox"/> \$10,001 - \$100,000 | ACQUIRED | DISPOSED |
| <input type="checkbox"/> \$100,001 - \$1,000,000 | | |
| <input type="checkbox"/> Over \$1,000,000 | | |

NATURE OF INVESTMENT
☐ Sole Proprietorship ☐ Partnership ☐ Other

YOUR BUSINESS POSITION _____

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

| | |
|---------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> \$0 - \$499 | <input type="checkbox"/> \$10,001 - \$100,000 |
| <input type="checkbox"/> \$500 - \$1,000 | <input type="checkbox"/> OVER \$100,000 |
| <input type="checkbox"/> \$1,001 - \$10,000 | |

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity or
Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

| | | |
|--------------------------------------------------|--------------|--------------|
| <input type="checkbox"/> \$2,000 - \$10,000 | ____/____/09 | ____/____/09 |
| <input type="checkbox"/> \$10,001 - \$100,000 | ACQUIRED | DISPOSED |
| <input type="checkbox"/> \$100,001 - \$1,000,000 | | |
| <input type="checkbox"/> Over \$1,000,000 | | |

NATURE OF INTEREST
☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold _____ Yrs. remaining ☐ Other _____

☐ Check box if additional schedules reporting investments or real property are attached

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name

Jean(nie) Fuller

► STREET ADDRESS OR PRECISE LOCATION

ATN # 425-020-05-00-8

CITY

Lake Isabella, CA

FAIR MARKET VALUE

☐ \$2,000 - \$10,000

☒ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/09 ACQUIRED

____/____/09 DISPOSED

NATURE OF INTEREST

☐ Ownership/Deed of Trust

☐ Easement

☐ Leasehold _____
Yrs. remaining

☒ 1/2 interest

Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

► STREET ADDRESS OR PRECISE LOCATION

ATN # 425-020-04-00-5

CITY

Lake Isabella, CA

FAIR MARKET VALUE

☐ \$2,000 - \$10,000

☒ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/09 ACQUIRED

____/____/09 DISPOSED

NATURE OF INTEREST

☐ Ownership/Deed of Trust

☐ Easement

☐ Leasehold _____
Yrs. remaining

☒ 1/2 interest

Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

☐ Guarantor, if applicable

Comments:

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name

Jean(nie) Fuller

► STREET ADDRESS OR PRECISE LOCATION

201 Aviation St, AP 091-040-2

CITY

Shafter, CA

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/09 ACQUIRED ____/____/09 DISPOSED

NATURE OF INTEREST

- ☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold ____ Yrs. remaining ☐ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

► STREET ADDRESS OR PRECISE LOCATION

ATN# 425-020-03-00-2

CITY

Lake Isabella, CA

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/09 ACQUIRED ____/____/09 DISPOSED

NATURE OF INTEREST

- ☐ Ownership/Deed of Trust ☐ Easement
☐ Leasehold ____ Yrs. remaining ☒ 1/2 interest Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

☐ Guarantor, if applicable

Comments:

SCHEDULE B
Interests in Real Property
(Including Rental Income)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Jean(nie) Fuller

► STREET ADDRESS OR PRECISE LOCATION

APN # 3240-002-002-06-00

CITY

Lancaster, CA

FAIR MARKET VALUE

☒ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/09
ACQUIRED

____/____/09
DISPOSED

NATURE OF INTEREST

☒ Ownership/Deed of Trust

☐ Easement

☐ Leasehold

Yrs. remaining

☐

Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

► STREET ADDRESS OR PRECISE LOCATION

Parcel # 183-0-100-515

CITY

Oxnard, CA

FAIR MARKET VALUE

☐ \$2,000 - \$10,000

☒ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/09
ACQUIRED

____/____/09
DISPOSED

NATURE OF INTEREST

☒ Ownership/Deed of Trust

☐ Easement

☐ Leasehold

Yrs. remaining

☐

Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

☐ Guarantor, if applicable

Comments:

SCHEDULE B
Interests in Real Property
 (Including Rental Income)

► STREET ADDRESS OR PRECISE LOCATION
461 Aviation St
 CITY
Shafter, CA

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
☐ \$2,000 - \$10,000
☒ \$10,001 - \$100,000 9 / 10 / 09 / / 09
☐ \$100,001 - \$1,000,000 ACQUIRED DISPOSED
☐ Over \$1,000,000

NATURE OF INTEREST
☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold Yrs. remaining ☐ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

► STREET ADDRESS OR PRECISE LOCATION
463 Aviation St
 CITY
Shafter, CA

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
☐ \$2,000 - \$10,000
☒ \$10,001 - \$100,000 9 / 10 / 09 / / 09
☐ \$100,001 - \$1,000,000 ACQUIRED DISPOSED
☐ Over \$1,000,000

NATURE OF INTEREST
☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold Yrs. remaining ☐ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)
 % ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)
 % ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

Comments:

SCHEDULE D
Income - Gifts

Name

Jean(nie) Fuller

► NAME OF SOURCE

State Farm

ADDRESS

1201 K Street, Suite 920 Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Insurance

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-----------|------------------------|
| 1 / 22 / 09 | \$ 116.00 | 2 GBCC Dinner Ticket |
| 2 / 7 / 09 | \$ 72.50 | Black History Gala |
| 2 / 7 / 09 | \$ 50 | KC Hispanic Chamber |

► NAME OF SOURCE

Rio Tinto/U.S. Borax

ADDRESS

P.O. Box 6609 Englewood, CO 80155

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Mining

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-----------|------------------------|
| 2 / 2 / 09 | \$ 108.27 | Dinner |
| | \$ | |
| | \$ | |

► NAME OF SOURCE

Counsel for Legislative Excellence

ADDRESS

2150 River Plaza Dr #150 Sac, CA 95833

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-----------|------------------------|
| 12 / 3 / 09 | \$ 147.01 | Briefcase |
| 12 / 3 / 09 | \$ 61.74 | Jacket |
| 12 / 3 / 09 | \$ 94.27 | Charm Bracelet |

► NAME OF SOURCE

Chevron

ADDRESS

6001 Bollinger Canyon Rd San Ramon, CA 94583

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Oil and Gas

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-----------|------------------------|
| 1 / 31 / 09 | \$ 150.26 | Dinner |
| | \$ | |
| | \$ | |

► NAME OF SOURCE

California Poultry Federation

ADDRESS

4640 Spyres Way, Ste 4 Modesto, Ca 95356

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Poultry Trade Association

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-----------|------------------------|
| 3 / 3 / 09 | \$ 192.14 | Dinner |
| | \$ | |
| | \$ | |

► NAME OF SOURCE

Counsel for Legislative Excellence

ADDRESS

2150 River Plaza Dr #150, Sac, CA 95833

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|---------|------------------------|
| 12 / 3 / 09 | \$ 8.72 | Gift bag |
| | \$ | |
| | \$ | |

Comments:

SCHEDULE D Income – Gifts

| |
|-----------------------------------------------------------------------------------------------|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Jean(nie) Fuller |
|-----------------------------------------------------------------------------------------------|

| ▶ NAME OF SOURCE <u>Kings River Water Association</u> ADDRESS <u>4886 E Jensen Ave Fresno, CA 93725</u> BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Water Management</u> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>12 / 11 / 09</u></td> <td><u>\$ 39.96</u></td> <td><u>2 Lunches</u></td> </tr> <tr> <td><u> / / </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u> / / </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table> | DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) | <u>12 / 11 / 09</u> | <u>\$ 39.96</u> | <u>2 Lunches</u> | <u> / / </u> | <u>\$</u> | <u> </u> | <u> / / </u> | <u>\$</u> | <u> </u> | ▶ NAME OF SOURCE <u>Associated Builders & Contractors</u> ADDRESS <u>1608 Norris Rd, Bakersfield, CA 93308</u> BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Construction Association</u> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>6 / 11 / 09</u></td> <td><u>\$ 75.00</u></td> <td><u>Gift Certificate</u></td> </tr> <tr> <td><u> / / </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u> / / </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table> | DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) | <u>6 / 11 / 09</u> | <u>\$ 75.00</u> | <u>Gift Certificate</u> | <u> / / </u> | <u>\$</u> | <u> </u> | <u> / / </u> | <u>\$</u> | <u> </u> |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|------------------------------|------------------------|---------------------|-----------------|------------------------------|-----------------|-----------|----------|-----------------|-----------|----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-------|------------------------|--------------------|-----------------|-------------------------|-----------------|-----------|----------|-----------------|-----------|----------|
| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) | | | | | | | | | | | | | | | | | | | | | | | |
| <u>12 / 11 / 09</u> | <u>\$ 39.96</u> | <u>2 Lunches</u> | | | | | | | | | | | | | | | | | | | | | | | |
| <u> / / </u> | <u>\$</u> | <u> </u> | | | | | | | | | | | | | | | | | | | | | | | |
| <u> / / </u> | <u>\$</u> | <u> </u> | | | | | | | | | | | | | | | | | | | | | | | |
| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) | | | | | | | | | | | | | | | | | | | | | | | |
| <u>6 / 11 / 09</u> | <u>\$ 75.00</u> | <u>Gift Certificate</u> | | | | | | | | | | | | | | | | | | | | | | | |
| <u> / / </u> | <u>\$</u> | <u> </u> | | | | | | | | | | | | | | | | | | | | | | | |
| <u> / / </u> | <u>\$</u> | <u> </u> | | | | | | | | | | | | | | | | | | | | | | | |
| ▶ NAME OF SOURCE <u>Boswell Company</u> ADDRESS <u>P.O. Box 877 Corcoran, CA 93212</u> BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Agriculture & Real Estate</u> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>12 / 11 / 09</u></td> <td><u>\$ 90.00</u></td> <td><u>Helicopter Ride for 2</u></td> </tr> <tr> <td><u> / / </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u> / / </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table> | DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) | <u>12 / 11 / 09</u> | <u>\$ 90.00</u> | <u>Helicopter Ride for 2</u> | <u> / / </u> | <u>\$</u> | <u> </u> | <u> / / </u> | <u>\$</u> | <u> </u> | ▶ NAME OF SOURCE ADDRESS BUSINESS ACTIVITY, IF ANY, OF SOURCE <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u> / / </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u> / / </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u> / / </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table> | DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) | <u> / / </u> | <u>\$</u> | <u> </u> | <u> / / </u> | <u>\$</u> | <u> </u> | <u> / / </u> | <u>\$</u> | <u> </u> |
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| <u> / / </u> | <u>\$</u> | <u> </u> | | | | | | | | | | | | | | | | | | | | | | | |
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| <u> / / </u> | <u>\$</u> | <u> </u> | | | | | | | | | | | | | | | | | | | | | | | |

Comments: _____

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

| |
|-------------------------------------------------------------------|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name <u>Jean(nie) Fuller</u> |

- Reminder – you must mark the gift or income box.
- You are not required to report "income" from government agencies.

| |
|-----------------------------------------------------------------------------------------------------------------------------------|
| ▶ NAME OF SOURCE <u>Kings River Conservation District</u> |
| ADDRESS <u>4886 E Jensen Ave</u> |
| CITY AND STATE <u>Fresno, CA 93725</u> |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Water Management</u> |
| DATE(S): <u> </u> / <u> </u> / <u>12</u> / <u>11</u> / <u>09</u> AMT: \$ <u>40.24</u> <small>(if applicable)</small> |
| TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income |
| DESCRIPTION: <u>Tour, Transportation & Refreshments</u> |

| |
|------------------------------------------------------------------------------------------------------------------------------------------------|
| ▶ NAME OF SOURCE |
| ADDRESS |
| CITY AND STATE |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| DATE(S): <u> </u> / <u> </u> / <u> </u> / <u> </u> / <u> </u> AMT: \$ <u> </u> <small>(if applicable)</small> |
| TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income |
| DESCRIPTION: <u> </u> |

| |
|------------------------------------------------------------------------------------------------------------------------------------------------|
| ▶ NAME OF SOURCE |
| ADDRESS |
| CITY AND STATE |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| DATE(S): <u> </u> / <u> </u> / <u> </u> / <u> </u> / <u> </u> AMT: \$ <u> </u> <small>(if applicable)</small> |
| TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income |
| DESCRIPTION: <u> </u> |

| |
|------------------------------------------------------------------------------------------------------------------------------------------------|
| ▶ NAME OF SOURCE |
| ADDRESS |
| CITY AND STATE |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE |
| DATE(S): <u> </u> / <u> </u> / <u> </u> / <u> </u> / <u> </u> AMT: \$ <u> </u> <small>(if applicable)</small> |
| TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income |
| DESCRIPTION: <u> </u> |

Comments:

RECEIVED

MAR 22 2010

EB

SCHEDULE B

Interests in Real Property
(Including Rental Income)CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

AMENDMENT

BY:

▶ STREET ADDRESS OR PRECISE LOCATION

APN# 3240 002 002 09 000

CITY

Lancaster, Ca

FAIR MARKET VALUE

☐ \$2,000 - \$10,000☒ \$10,001 - \$100,000☐ \$100,001 - \$1,000,000☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

/ / 09

ACQUIRED

/ / 09

DISPOSED

NATURE OF INTEREST

☒ Ownership/Deed of Trust☐ Easement☐ Leasehold

Yrs. remaining

☐

Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499☐ \$500 - \$1,000☐ \$1,001 - \$10,000☐ \$10,001 - \$100,000☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER *

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

%

☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000☐ \$1,001 - \$10,000☐ \$10,001 - \$100,000☐ OVER \$100,000☐ Guarantor, if applicable

▶ STREET ADDRESS OR PRECISE LOCATION

CITY

FAIR MARKET VALUE

☐ \$2,000 - \$10,000☐ \$10,001 - \$100,000☐ \$100,001 - \$1,000,000☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

/ / 09

ACQUIRED

/ / 09

DISPOSED

NATURE OF INTEREST

☐ Ownership/Deed of Trust☐ Easement☐ Leasehold

Yrs. remaining

☐

Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499☐ \$500 - \$1,000☐ \$1,001 - \$10,000☐ \$10,001 - \$100,000☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

Verification

Print Name Jean FullerOffice, Agency
or Court CA State Assembly District 32 MemberStatement Type ☐ 2009/2010 Annual ☐ Assuming ☐ Leaving
☒ 09 Annual ☐ Candidate
(yr)

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 3/21/2010

Signature